PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number レクTター2004ー DD15 US (7321ー 46 ii)

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			17		1	:				OR 7			
FOR			NUMBER FILED		A11 18 47	NUMBER EXTRA		SIC FEE	FEE	-	RATE	FEE	
			NUMBER FILED		NUME	NUMBER EXTRA			385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			/ / minus 20= *		*		 	(\$ 9=	İ	OR	X\$18=		
INDEPENDENT CLAIMS			3 minus 3 = 1		*		>	<43=		OR	X86=		
MU	JLTIPLE DEPE	NDENT CLAIM P	RESENT	IESENT			+	145=		OR	+290=	·	
* If the difference in column 1 is less than zero, enter "						column 2	T	OTAL	 	OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
_	1	(Column 1)		(Column 2		(Column 3)		SMALL ENTITY		OR	OR SMALL ENTITY		
AMENDMENT A		REMAINING AFTER AMENDMENT	·	NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	R	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	×	\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= _	×	43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+290=		
+145= TOTAL										'	TOTAL	-	
		ADDI	T. FEE			ADDIT. FEE							
m		(Column 1) CLAIMS		(Colum	ST	(Column 3)		—Т	ADDI-	1 [<u>1</u>	ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA	R/	ATE	TIONAL FEE		RATE	TIONAL	
	Total	*	Minus	**		=	X	9=		OR	X\$18=		
	Independent	*	Minus	***		=	· X	43=	·	OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-	_				
								45=		OR	+290=		
				•				TOTAL T. FEE		OR ,	TOTAL DDIT. FEE		
(Column 1) (Column 2) (Column 3)												·	
MEN		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMBI PREVIOU PAID F	ER JSLY	PRESENT EXTRA	RA	TE 7	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
	Independent		Minus	***		=	X4				X86=	<u>-</u>	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 -		OR	700 =		
* 12	the entry in anti-	+14	15=		OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OFTITION OF THE SPACE IS LESS THAN 3, enter "3."										OR A	TOTAL DDIT. FEE		
T	he "Highest Num	ber Previously Paid	For" (Total or	Independen	iess than it) is the l	i 3, enter "3." highest number			opriate box				